



TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	08/846,933	
	Filing Date	April 30, 1997	
	First Named Inventor	CLELAND, Jeffrey L. et al.	
	Group Art Unit	1645	
	Examiner Name	Hines, J.	
Total Number of Pages in This Submission	7	Attorney Docket Number	402E-916903US

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Issue Fee Transmittal + copy <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): Fee Address Indication form; Request for Corrected Filing Receipt; receipt acknowledgment postcard
<input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	
Authorization to Charge Deposit Account Please charge Deposit Account No. 50-0893 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Emily M. Haliday, Reg. No. 38,903, Quine Intellectual Property Law Group, P.C.
Signature	
Date	March 18, 2005

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the U. S. Postal Service as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below.			
Typed or printed name	Amelia Weintraub		
Signature		Date	March 18, 2005